

# WATER WELL PLUGGING RECORD

Form WWC-5P

K8A 828-1212

ID No.

SU3-

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction: <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number: <u>19</u>	Township Number: <u>26S</u>	Range Number: <u>01E</u>																																				
Distance and direction from nearest town or city street address of well if located within city? <u>2435 W. 53rd Street</u>																																								
2 WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code <u>JAMES T ROSS</u> <u>825 E 2nd</u> <u>Wichita KS 67202</u>		Board of Agriculture, Division of Water Resources Application Number:																																						
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>12</u> ft.																																							
	WELL'S STATIC WATER LEVEL _____ ft.																																							
	WELL WAS USED AS:																																							
	1 Domestic      5 Public Water Supply      9 Dewatering 2 Irrigation    6 Oil Field Water Supply     10 Monitoring Well 3 Feedlot       7 Lawn and Garden (domestic)   11 Injection Well 4 Industrial    8 Air Conditioning               12 Other _____																																							
Was a chemical/bacteriological sample submitted to Department? Yes ____ No <u>(No)</u>																																								
If yes, mo/day/yr sample was submitted _____																																								
Water Well Disinfected: Yes ____ No ____																																								
5 TYPE OF BLANK CASING USED:																																								
1 Steel      3 RMP (SR)      5 Wrought      7 Fiberglass      9 Other (specify below) <u>2 PVC</u> 4 ABC          6 Asbestos-Cement   8 Concrete Tile Blank casing diameter <u>4</u> In. Was casing pulled? Yes <u>X</u> No ____ If yes, how much <u>Oversized to 12"</u> Casing height above or below land surface _____ In.																																								
6 GROUT PLUG MATERIAL: 1 Neat cement   2 Cement grout <u>3 Bentonite</u> 4 Other _____																																								
Grout Plug Intervals From <u>0</u> ft. to <u>12</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																								
What is the nearest source of possible contamination:																																								
1 Septic tank      6 Seepage pit      11 Fuel storage      16 Other (specify below) 2 Sewer lines    7 Pit privy        12 Fertilizer storage <u>Old Gas Station</u> 3 Watertight sewer lines   8 Sewage lagoon   13 Insecticide storage <u>on site.</u> 4 Lateral lines       9 Feedyard       14 Abandoned water well 5 Cess Pool          10 Livestock pens   15 Oil well/ Gas well																																								
Direction from well? _____		How many feet? _____																																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>12</u></td> <td></td> <td><u>Bentonite</u></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					FROM	TO	CODE	PLUGGING MATERIALS	<u>0</u>	<u>12</u>		<u>Bentonite</u>																												
FROM	TO	CODE	PLUGGING MATERIALS																																					
<u>0</u>	<u>12</u>		<u>Bentonite</u>																																					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>9/6/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> . This Water Well Record was completed on (mo/day/yr) <u>10/4/06</u> under the business name of <u>Bluestem Env. Engineering/Water</u> by (signature) <u>[Signature]</u>																																								
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																								